

**NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES
BISMARCK, NORTH DAKOTA
July 1, 2014**

IM 5211

TO: County Social Service Directors
County Eligibility Workers
Economic Assistance Policy Regional Representatives
Economic Assistance Policy Quality Control Reviewers

FROM: Julie Schwab, Director, Medical Services Division

SUBJECT: **Home and Community Based Services – Waiver Updates**

PROGRAMS: Medicaid

EFFECTIVE: July 1, 2014

RETENTION: Until manualized

SECTIONS AFFECTED: **510-05-15-05 Home and Community Based Services (HCBS)**

Changes will be made to some of the Home and Community Based Services waivers as follows effective July 1, 2014.

The Medicaid program provides home and community based services (HCBS) to eligible individuals who have been screened as requiring nursing care services or ICF/IID (intermediate care facility for individuals with intellectual disabilities) level of care but who choose to receive those services in the community. Eligibility for individuals with an ineligible community spouse may be determined using the Spousal Impoverishment Provision found at 05-65. Services may be provided through one of the following waivers:

1. Traditional Waiver for Individuals with Intellectual and Developmental Disabilities: Home and Community Based Services are provided to individuals who meet the eligibility criteria for early intervention services for infants and toddlers under the age of three; individuals

who have an intellectual disability and/or meet the criteria for a developmental disability related condition prior to the age of 22 and who are screened to the ICF-ID (intermediate care facilities for intellectual disabilities level of care). These individuals generally meet the disability criteria of the Social Security Administration, however, the few who do not may still be eligible for these waived services. Waiver services include residential services, day services, employment supports, family support services, parenting supports, extended home health care and financial help with the cost of equipment, supplies and environmental modifications. The waiver covers services provided by licensed providers, qualified service providers and some services can be directed by the waiver recipient. (Began in 1981.)

2. Medicaid Waiver for Home and Community Based Services: Services are provided to individuals at least 18 years of age, who meet the disability criteria of the Social Security Administration, or are at least 65 years of age who are screened as requiring care in a nursing facility, but choose to receive services in the community. As of April 1, 2007, this waiver merged the Waiver for the Aged or Disabled (which began October 1, 1983) and the Waiver for the Traumatic Brain Injured (which began in 1994).
3. Waiver for Children with Medically Fragile Needs: Services are provided to children ages 3 to 18 who have a serious illness or condition which is anticipated to last at least 12 or more months. Eligible children have medically intensive needs and prolonged dependence on medical care or medical technology. The waiver is limited to 15 children at a time. (Began June 1, 2008.)
4. PACE (Program of All-Inclusive Care of Elderly): PACE is available to Medicaid or Medicare recipients age 55 or older, who are screened as requiring care in a nursing facility. A capitated payment is made to the PACE provider who then provides health and health related services to allow individuals to remain in the community. (Began August 1, 2008.)
5. Money Follows the Person Grant: This Grant program assists recipients who are residing in a nursing facility or an ICF/ID who want to transition from an institutional care setting to a HCBS setting. Recipients must have been residing in the institutional setting for a period of 3 consecutive months or more, be screened as requiring care in a nursing facility or ICF/ID, and be Medicaid eligible for at least the last day of receipt of institutionalized service. (Began June 20, 2008.)

6. Technology Dependent Medicaid Waiver: Services are provided to individuals who are ventilator dependent for a minimum of 20 hours per day, and who are at least 18 years of age. The goal is to adequately and appropriately sustain individuals in their own homes and communities and to delay or divert institutional care. The waiver is limited to 3 recipients at a time. (Began August 1, 2007.)
7. Children's Hospice Program: Provides multiple services to children from birth to their 22nd birthday who have been screened as needing Nursing Home level of care and who have less than a year of life expectancy. The services are designed to assist the family in dealing with the diagnosis and emotions a family needs to deal with when preparing for the possible death of their child. This waiver allows a family to continue to explore curative measures at the same time they are utilizing hospice services. The waiver is limited to 30 recipients in a 12-month period. (Began July 1, 2010.)
8. Autism Spectrum Disorders Waiver for Birth Through Age ~~4~~ 7: Provides multiple services to a family with a child from birth to their ~~5~~ 8th birthday ~~who are eligible for Developmentally Disabled Program Management~~, have a confirmed diagnosis on the Autism Disorder Spectrum , and meet the ICF/IID level of care. ~~, and are eligible for Medicaid.~~ These services build on existing services available in North Dakota. ~~Children[and Ffamilies will also receive~~ skills training, program design and monitoring, service management, and access to respite services ~~help in coordinating services, and access to in-home support staff~~ to help provide structured activities that focus on communication, behavior, and other individual needs. The waiver also provides financial help with the cost of ~~equipment, supplies, and environmental modifications~~ assistive technology. The waiver is limited to ~~30~~ 47 recipients in a 12-month period. (Began November 1, 2010.)